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APPLICANTS

Kuan-Lin Peng, Taipei, TAIWAN;

** CONTINUING DATA

NONE B²

** FOREIGN APPLICATIONS

NONE B²

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <u>B</u> Initials	TAIWAN	7	11	3

ADDRESS

04586
 ROSENBERG, KLEIN & LEE
 3458 ELLICOTT CENTER DRIVE-SUITE 101
 ELLICOTT CITY, MD
 21043

TITLE

Protective mask of mobile phone

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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